

DO/ED BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 508028	RECEIPT DATE:	03 / 06 / 00
IA NUMBER:	PCT/ US98 / 11721	IA FILING DATE:	06 / 05 / 98
FAMILY NAME:	CHAPMAN	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	GRAHAM M	DEMAND RECEIVED (Y/N):	N
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	06 / 05 / 97
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	PET 43 US	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER: 0000000	TELEPHONE 0000000000	FAX
NAME:	JOHN A WATERS		
	WATERS & MORSE		
STREET:	125 OTTAWA AVENUE NW		
	SUITE 400		
CITY:	GRAND RAPIDS		
STATE/COUNTRY:	MI	ZIP:	49503
EMAIL:			
APPLICATION TITLES:			
	PLASTIC MASKING COVER		

TAB TO LAST POSITION, PUSH SEND